BEST AVAILABLE COPY								09/827013					
								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000													
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
(Column 1) (Column 2) TOTAL CLAIMS							TYPE				R SMALL ENTITY		
			82		Service Control		RA		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			92 minus 20=		6.2		X\$	9=	558 c)	OR	X\$18=		
INDEPENDENT CLAIMS					5		X41)=	2000	OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+13	 5 =	230(.)	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	TOT	AL	1.1130		TOTAL		
CLAIMS AS AMENDED - PART II									1711 3.5	r	OTHER	THAN	
(Column 1) (Column 2) (Column 3) SI									ENTITY	OFI	SMALL E	NTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 77	Minus	". X	a		X\$	9=_		OR	X\$18=	>	
	Independent	. 7	Minus	•••	3	=	- X40)=		OR	X80=		
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR.			
								5= (OR	+270=		
AD										OR	ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT 8		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RA ⁻	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=	XS	9=		OR	X\$18=		
	Independent	•	Minus	*10		=	X41)=	1		X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						-			OR			
							+13			OR	+270=		
							ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3)							
AMENOMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	FIA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=	X\$	9=		OR	X\$18=		
	Independent	•	Minus	•••		=	X40		 	1	X80=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM		^*	<i>-</i>		OR	1002	 	
											+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE ADDIT. FEE													
***	If the "Highest Nu	mber Previously P aber Previously Pa	aid For IN THI	S SPACE	is tess tha	an 3, enter "3."			propriate bo	x in co			

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